

Arista 3 Report Executive Summary

# Sigma Theta Tau International J

## Mission of Sigma Theta Tau International:

The Honor Society of Nursing, Sigma Theta Tau International provides leadership and scholarship in practice, education and research to enhance the health of all people. We support the learning and professional development of our members, who strive to improve nursing care worldwide.

## Vision of Sigma Theta Tau International:

Sigma Theta Tau International's vision is to create a global community of nurses who lead in using scholarship, knowledge and technology to improve the health of the world's people.

## Strategic Goals of Sigma Theta Tau International:

- 1. Develop members across the span of their careers.
- 2. Build strong chapters and foster collaborative leadership.
- 3. Advance global linkages at the organizational and member levels.
- 4. Prepare and position nurses to lead in diverse, complex, health-related environments.
- 5. Advance the scientific base of nursing practice through the scholarship of research.
- 6. Stimulate scholarly practice in the professional lives of members.
- 7. Identify, secure and use a variety of resources to ensure the organization's future.



Sigma Theta Tau International

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# LaPurpose of the Arista Think-Tank Initiative

Now completed, the Arista series, an initiative of the Honor Society of Nursing, Sigma Theta Tau International, was designed to bring the best thinking to bear in confronting health issues of global significance, providing a multinational, interdisciplinary platform from which to influence the change of nursing practice.

The Arista think-tank meetings, named for the Greek word meaning "the brightest," assembled experts and reactors to converse, debate, find consensus and develop strategies for the future of nursing in an era of continuing health sector reform.

# Acknowledgement <sup>1</sup>

Sigma Theta Tau International gratefully acknowledges the expertise, time and contribution of the 109 health care experts, representing nursing, medicine, health policy, government, health economics and finance, health administration, and nongovernmental organizations. They brought their best thinking and vast experiences to the deliberation tables, working together to create a blueprint for nursing's preferred future.

Additional acknowledgement and appreciation is extended to the 57 individuals recognized as reactors, who stimulated and validated the thinking of the expert panelists, and to the Arista3 Executive Planning Committee which provided direction and networks.

This collective contribution of knowledge and wisdom enabled Sigma Theta Tau International to provide this opportunity, culminating in visions and actions to realize the global preferred future of nurses and health.

# Executive Summary

## Global Health Issues and Challenges

Establishing healthy communities around the globe is challenged by the presence of disease, environmental conditions, violence and disparity. The World Health Organization (WHO) identified 11 global health priorities for its 2004-2005 biennium: malaria; tuberculosis; HIV/AIDS; cancer, cardiovascular disease and diabetes; tobacco; maternal health; health and environment; food safety; mental health; safe blood; and health systems. In addition, the 2003 World Health Report issued by WHO identified leading risk factors responsible for 33% of all worldwide deaths each year. These factors included underweight, undernourished children; adverse consequences of unsafe sex; high blood pressure and cholesterol; tobacco and alcohol consumption; unsafe water; sanitation and hygiene; indoor smoke; iron deficiency; and obesity.

Coupled with these health issues and risk factors are the realities of continually changing health care delivery systems. Whether public or private systems are in place, nations continue to struggle with structuring equitable, accessible and cost-effective systems that meet their population needs. Cultural, language, religious, economic, social and political diverseness further challenges global health. Yet, despite these differences, which feasibly isolate communities and nations, health goals and even solutions that transcend these issues and differences exist. Common to this goal attainment is the belief that alignment of community and population needs with those of the health system is paramount. In addition, effective delivery of health care services requires culturally appropriate, knowledge-driven, holistic and humane care. The nursing profession fulfills this care delivery requirement on a daily basis, thereby making its major contribution to health of communities. As the largest corps of health care providers globally, nurses have the capacity to serve as caregivers and change agents in creating and implementing community- and populationfocused health systems. The profession intervenes to promote health, prevent disease, provide direct care, create models of health care delivery, and develop health and social policy. Worldwide, nurses use available resources to secure and improve the health of individuals, families and communities. However, challenges such as resource allocation and maldistribution compromise the ability of the nursing profession to maximize its contributions to health communities and global health.

#### The Arista Series

Envisioning the future of the nursing profession is required as an initial action to optimizing nurses' effect in influencing the health of people. Hence, the Honor Society of Nursing, Sigma Theta Tau International commissioned a series of multinational, multidisciplinary conferences named the Arista series (arista, a Greek word meaning "the brightest") to convene the best thinking regarding the nursing profession's preferred future in creating healthy communities. Through conversation, debate and consensus building, experts at these conferences created a blueprint for action that has the potential to transform health care regionally around the world.

Arista2 Nurses and Health: Healthy People–Leaders in Partnership, the second conference in the Arista series, brought together 28 Canadian and U.S. health care experts from economics, funding agencies, medicine, nursing and systems administration. These experts articulated a preferred future for the nursing profession as one that considered nursing to be central in every health care system. They also concluded that nurses make the most significant contributions to the health of communities by providing holistic and humane care. They noted that nurses most effectively and efficiently deliver holistic and humane care by aligning the needs of populations with the needs of

systems; collaborating with communities in determining how to best improve health and care; and creating partnerships with individuals, communities and colleagues in developing and managing community-based health care systems.

#### Arista3 Nurses and Health: A Global Future

To determine the extent to which the findings from the Arista2 Nurses and Health: Healthy People–Leaders in Partnership conference were applicable on a global basis, a series of five meetings was convened in five different world regions. This series of regional meetings became known as Arista3 Nurses and Health: A Global Future.

These five conferences, titled Arista3 Nurses and Health: A Global Future, posed discussion questions on the preferred future of nursing in addressing health issues, the profession's contribution to achieving healthy communities, and strategic areas of action to realize this future in the following world regions: the Americas and the Caribbean; the Pacific Rim and Southeast Asia; Africa and the Near East; Northern, Western and Eastern Europe; and Southern Europe and the Mediterranean. Each regional meeting occurred over 2 1/2 days and was facilitated by a professional health futures facilitator.

Through dialogue and consensus building, 109 expert participants from nursing, medicine, economics, health care delivery and administration, government economics, and private industry validated the principal concepts of the previous conference for relevance and compatibility within the specific world region. To stimulate discussion, participants were asked:

- How can nurses in the region best contribute to the health of their communities?
- What scholarly work is necessary to support the contributions of nurses to the health of communities in the region?

While the process confirmed that there were differences and/or uniquenesses within each world region, it also confirmed that commonalities existed as well. For instance, participants in all five regional conferences identified that they were experiencing a nursing shortage. However, key causes of that shortage were different. In the United States and Canada, participants indicated that the aging nursing work force was contributing to the nursing shortage, while the nursing shortage in Africa and the Near East was the primary result of AIDS-related deaths among nurses. In the Newly Independent States, the recruitment of nurses out of that region was the primary cause of the nursing shortage.

It is the commonalities identified in this report that unite nurses globally in their desire to improve the health of people. While actions taken to realize this common professional goal must and do vary region by region and even country by country based on the uniqueness of each, shared priority action areas do exist. These commonalities, as well as other findings associated with the Arista3 meetings, are summarized below.

# The Preferred Future in Creating Healthy Communities

All Arista3 conferences discussed the preferred future for the nursing profession in creating healthy communities. Across all geographic regions, four components of nursing's preferred future were consistently identified. These components highlight the important and unique contributions nurses make in the health care experience, wherever that experience occurs, and include:

- The need for profession restructuring so that nurses and the nursing profession are considered to be vital, integral partners in every health care system;
- The importance of focusing on delivering culturally appropriate, evidence-based, holistic and humane care;
- Delivering care to maximize the health of individuals, families and communities; and
- Achieving equitable health outcomes across the life span.

## Roles in Which Nurses Can Make the Strongest Contributions

The Arista2 conference and all five of the Arista3 conferences identified roles in which nurses could make the strongest contributions in the quest to achieve the preferred future of healthy communities. Without exception, each conference concluded that nurses could make the strongest contributions in:

- The delivery of evidence-based care
- Policy development
- Professional advocacy

Four of the six conferences identified health promotion and disease prevention, as well as engaging in knowledge-related endeavors, as roles/activities in which nurses could make the strongest contributions. Experts in these conferences also indicated that engaging in leadership development activities and creating new health care delivery systems were vital to the actualization of nursing's preferred future. Other role-related contributions could be made by:

- Establishing new educational models;
- Building the science of nursing by conducting research;
- Delivering culturally sensitive/appropriate care;
- Using available technology;
- Facilitating health information mediation;
- Creating new community/primary care delivery models;
- Creating healthy practice environments;
- Generating ethical and legal standards to guide the profession; and
- Establishing collaborations and/or partnerships.

## Unique Challenges in Global Regions

At all five Arista3 conferences, health experts identified challenges unique to their global region. These challenges were acknowledged so that informed, enlightened strategic action is taken to realize the preferred future for the nursing profession. While participants at all five Arista3 conferences articulated unique, region-specific challenges, trends emerged. The most frequently cited unique challenges were:

- Differing cultures and associated values, and beliefs requiring balancing and integrating Western medicine and health care principles with more traditional approaches;
- Differing population-related health needs related to changing disease patterns and shifting

health priorities; and

• Research-related challenges.

With regard to research challenges, participants in four Arista3 conferences discussed difficulties associated with:

- Developing the science of nursing;
- Conducting research to support nursing actions;
- Accessing evidence; and
- Developing and integrating research methodologies, practices and programs into nursing practice.

Consistency across regions was also seen in challenges related to:

- Access to and distribution of resources, especially in remote/rural settings in which nurses are the primary source of care; and
- Variation related to the development of practice, competency, and regulatory and legal standards.

Experts in two Arista3 conferences identified challenges related to:

- Leadership development;
- Ongoing access to continuing education;
- Economics:
- Ethics in recruitment/migration and with human rights issues;
- The status of nursing as a profession; and
- The presence of civil conflict.

Other unique challenges included:

- Gender-related issues, including mainstreaming and gender inequity;
- Political differences;
- Language and communication difficulties;
- Occupational hazards;
- Role differentiation;
- A unified nursing voice; and
- Brain drain.

# Strategic Action Areas and Recommendations for Action

Experts of five Arista3 conferences identified strategic action areas and made recommendations for each action area to stimulate movement toward the realization of nursing's preferred future. While action area recommendations were region-specific and reflected the current realities of each global region, there was a significant degree of alignment among the regions for the strategic action areas designed to bring to fruition nursing's preferred future. Strategic action targeting the creation of comprehensive, culturally sensitive, student-centered educational system models that facilitate career continuity was cited as a strategic action item at every conference. Regarding the creation of new educational system models, two expert groups cited the need to focus on:

• Faculty competence, development and succession planning;

- Creating compliance-assuring mechanisms;
- · Developing educational standards; and
- Providing accessible and adequate continuing education opportunities.

Synergy among regions was also seen in the strategic areas of:

- Leadership and professional development;
- Knowledge development, dissemination and application;
- Policy formulation and/or professional advocacy; and
- The provision of evidence-based care.

Regarding evidence-based care, the importance of focusing on population needs and on health promotion and disease prevention was identified. In addition to these strategic action areas, other areas for strategic action included:

- Making practice environment improvements by developing new service coordinating models of care;
- Creating research-related models and partnerships;
- Enhancing the image of the profession of nursing by:

Communicating the value and contributions of nurses;

Garnering the respect of other disciplines;

Investing in leadership development programs;

Communicating the profession's commitment to continuous, lifelong learning; and

Including nursing in national health development action plans.

- Dealing with role recognition and role delineation issues;
- Creating opportunities to collaborate and partner;
- Improving communication with the public;
- Obtaining public support to maximize the nursing profession;
- Identifying mechanisms to improve the availability of human and material resources;
- Developing ethical recruitment/migration and retention, resource allocation, human rights and provision of care models;
- Creating mechanisms that ensure that nurses practice in accordance with legal standards and ethical principles; and
- Addressing work force-related issues including:

The shortage and/or maldistribution of nurses;

Economic issues that impact the profession and the individual nurse;

The recruitment, retention and retirement of nurses:

The creation of regulatory mechanisms within the profession to effectively regulate nurses.

### Common Recommendations for Action

While region-specific variation was seen in the recommendations for action, a number of trends emerged. These trends were seen in the:

- Environments in which nurses practice;
- Way nurses lead;

- Knowledge nurses need;
- Settings in which nurses work;
- Conditions under which the profession operates;
- Influence of nurses; and
- Way nurses learn.

Specific recommendations for each of these trends also showed commonality of needed action. These actions are as follows:

### Environments in which nurses practice

- Create new, community-based health care delivery systems;
- Provide adequate funding to deliver culturally sensitive, evidence-based, outcomes-focused and cost-effective care that promotes health, prevents disease and permits the effective management of illness;
- Develop collegial multidisciplinary partnerships;
- Institute core competencies and standards for professional practice;
- Expand nursing roles to meet population needs in a variety of settings;
- Develop nursing's competency to access and use technology and to effectively apply health information;
- Develop innovative models of nursing care;
- Define new roles and settings as practice evolves;
- Coordinate continuity of care between hospital and community/primary care environments; and
- Create partnerships with individuals, families, communities and populations so that informed decision-making about health care matters occurs.

#### The way nurses lead

- Promote nurses serving in leadership roles within every health system;
- Promote a positive image of nursing in the media;
- Educate the public and other stakeholders about the contributions nurses make to create healthier communities worldwide;
- Develop cross-cultural mentoring relationships that include the use of available technology;
- Educate and inspire nurses to provide leadership in the creation of new health systems;
- Collaborate across nursing organizations;
- Advance the responsibility of nurses to mentor the next generation of nurses;
- Develop diverse and innovative mechanisms, including distance learning, to disseminate accessible and applicable continuing education opportunities to nurses around the world; and
- Promote lifelong learning systems for nurses.

#### Knowledge nurses need

• Establish collaborative and multidisciplinary research programs among institutions and countries;

- Advocate for research to include an international component;
- Apply and teach appropriate investigative methodologies, including qualitative and applied;
- Create evidence-based nursing models;
- Disseminate best practices in nursing research;
- Develop strategies to motivate nurses to conduct research;
- Demonstrate, through research, the impact of nursing on health and outcomes;
- Fund nursing research;
- Define nursing research priorities; and
- Translate research for the world community.

#### Settings in which nurses work

- Identify migration and distribution patterns and identify innovative solutions to resolve issues that emerge;
- Promote employment practices that provide safe, fair, stimulating work environments; and
- Create career path models for all levels of nursing.

### The conditions under which the profession operates

- Support existing international code for the ethical recruitment of nurses;
- Promote equitable international mechanisms to deal with the globalization of the pharmaceutical industry;
- Ensure the protection of human rights in conducting research; and
- Eliminate prejudice and promote equity between peoples regardless of race, religion or ethnic origin.

#### The influence of nurses

- Promote long-term investment in nursing by policymakers and funders;
- Ensure that nurses hold policy development positions;
- Collaborate with policymakers and professionals from other disciplines to impact policy initiatives and changes;
- Address gender-based discrimination;
- Advocate for equal access to evidence-based care;
- Support the self-regulation of nurses through licensure;
- Deploy the strength of nursing organizations to develop and implement nursing agendas globally;
- Develop political competency among nurses; and
- Generate data that inform health and social policy.

#### The way nurses learn

- Design and implement new models of education that prepare nurses for autonomous roles;
- Design student-focused curricula driven by the health needs of populations;
- Develop innovative strategies to educate patients, communities and nurses;

- Invest in the education of nurse educators;
- Fund government and private systems to support human resource development in nursing;
- Create quality-assuring mechanisms that advance and enhance the academic environment;
- Promote succession planning;
- Establish common standards for education at the university level;
- Establish minimum education and curriculum standards;
- Develop competency standards for faculty and require that competence be maintained;
- Promote collaboration between education and service sectors; and
- Provide students with multidisciplinary experiences.

### Conclusion

The multinational, interdisciplinary Arista3 think tank conferences brought together health experts from around the world to establish the preferred future for the nursing profession. Key components of that preferred future are profession restructuring and the delivery of holistic, humane and culturally appropriate care. The roles in which nurses could make the strongest contributions were delineated. Delivery of evidence-based care, policy development and professional advocacy emerged as important roles in every world region. In addition, unique, region-specific challenges were outlined and strategic action areas and recommendations for action were described. Creating comprehensive, culturally sensitive, student-centered educational system models was identified as a strategic action item in all five Arista3 conferences. Substantial synergy among world regions was also seen in the environments in which nurses practice, the way nurses lead, the knowledge nurses need, the settings in which nurses work, the conditions under which the profession operates, the influence of nurses, and the way nurses learn.

Knowledge derived from this series of envisioning conferences has the potential of creating healthier communities around the world. Strategic action is required, and unique, region-specific challenges must be incorporated. While recommendations for actions have been identified, it will take the concerted commitment of nurses and their health care stakeholders worldwide to be advocates and change agents by acting on these recommendations. It is only after action is taken that the preferred future will begin to emerge and the health of communities will begin to improve.